APPENDIX 4

STI screening protocol for Prepubertal Children and Pubertal girls intolerant of speculum examinations

Minimum screen for sexually transmitted infections	
Sample	Condition or organism to be detected
Females: sample can be either from vagina, vestibule or discharge (if present)* 1 Swab (if tolerated): - Slide for Gram stain/clue cells/spores/pseudohyphae + - Amies transport media	Abnormal flora, BV, Candida, GC
Young people: 1 swab rubbed on posterior vaginal wall or vestibule: CT culture if available (NAAT/EIA/DIF not evaluated. If positive recommend confirmation with CT culture)	СТ
Males: 2 Urethral swabs (if tolerated) - Slide for Gram stain + Amies transport media - CT culture (EIA/DIF/NAAT as for females)	Urethritis, GC, TV CT
Male & Female: FVU (20ml) NAAT yet to be evaluated in young people. Consider using urine as screening test and confirm with cultures if positive (EIA/DIF can be used in males)	CT, GC

^{*} If discharge present or swabs well tolerated, consider inoculation directly onto TV culture and gonococcal medium.

Other tests as indicated	Condition or organism to be detected
1 Swab from open sore:	
 Virus culture, NAAT or Antigen detection 	HSV type 1 and 2
2 Swabs from oropharynx (if indicated)	GC/CT
(1 swab if NAAT and confirm positives with culture)	(Combined GC/CT NAAT)
2 Rectal Swabs (if indicated)	GC/CT
(1 swab if NAAT and confirm positives with culture)	
Consider biopsy of AGW, DNA probe techniques for subtyping have not been fully evaluated.	AGW
Serology Tests	Offer; Syphilis, HIV, HBV, HBC.
	HSV-1 or 2 type specific serology
	(if indicated following rape or
	abuse).
	Repeat at 3 and 6 months.

AGW-Anogenital warts, BV-Bacterial Vaginosis, CT- *Chlamydia trachomatis*, DIF-Direct Fluorescent Antibody, EIA- Enzyme Immunoassay, FVU-First Void Urine, GC- *Neisseria gonorrhoeae*, HIV-Human Immunodeficiency Virus, HPV-Human Papilloma virus, HSV-herpes simplex, NAAT-Nucleic Acid Amplification Techniques, TV- *Trichomonas vaginal*